

This Page Is Inserted by IFW Operations
and is not a part of the Official Record

BEST AVAILABLE IMAGES

Defective images within this document are accurate representations of the original documents submitted by the applicant.

Defects in the images may include (but are not limited to):

- BLACK BORDERS
- TEXT CUT OFF AT TOP, BOTTOM OR SIDES
- FADED TEXT
- ILLEGIBLE TEXT
- SKEWED/SLANTED IMAGES
- COLORED PHOTOS
- BLACK OR VERY BLACK AND WHITE DARK PHOTOS
- GRAY SCALE DOCUMENTS

IMAGES ARE BEST AVAILABLE COPY.

**As rescanning documents *will not* correct images,
please do not report the images to the
Image Problem Mailbox.**

**APPLICATION FOR UNITED STATES PATENT
DECLARATION AND POWER OF ATTORNEY**

As a below named inventor, I hereby declare that:
My residence, post office address and citizenship are as stated below next to my name; that
I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint
inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the
invention entitled:
EMULSION AGGREGATION TONER HAVING NOVEL SURFACE MORPHOLOGY PROPERTIES

described and claimed in the specification:

Check one

*a. ☒ attached hereto.

b. ☐ filed on _____ as Application No. _____ and amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims,
as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in
Title 37, Code of Federal Regulations, §1.56. Under Title 35, U.S. Code §119, the priority benefits of the following foreign
application(s) and/or United States provisional application(s) filed by me or my legal representatives or assigns within one year
prior to this application are hereby claimed:

The following application(s) for patent or inventor's certificate on this invention were filed in countries foreign to the
United States of America either (a) more than one year prior to this application, or (b) before the filing date of the above-named
foreign priority application(s) and/or United States provisional application(s):

I hereby appoint the following as my attorneys of record with full power of substitution and revocation to prosecute this
application and to transact all business in the Patent Office:

Mark Costello	Reg. No. 31,342;	Elizabeth F. Harasck	Reg. No. 28,850;
Ronald F. Chapuran	Reg. No. 26,402;	Eugene O. Palazzo	Reg. No. 20,881;
Kevin R. Kepner	Reg. No. 32,145;	Marlo A. Costantino	Reg. No. 33,565;
Nola Mae McBain	Reg. No. 35,782;	Stephen J. Roe	Reg. No. 34,463;
James A. Obit	Reg. No. 27,075;	Joel S. Armstrong	Reg. No. 36,430;
William P. Berridge	Reg. No. 30,024;	Christopher W. Brown	Reg. No. 38,025;
Kirk M. Hudson	Reg. No. 27,562;	Richard E. Rice	Reg. No. 31,560;
Thomas J. Pardini	Reg. No. 30,411;	Paul Tsou	Reg. No. 37,956; and
Edward P. Walker	Reg. No. 31,450;	Eric D. Mouchouse	Reg. No. 38,565.
Robert A. Miller	Reg. No. 32,771;		

**ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO OLIFF &
BERRIDGE, PLC, P.O. BOX 19928, ALEXANDRIA, VIRGINIA 22320, TELEPHONE (703) 836-6400.**

I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein
of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these
statements were made with the knowledge that willful false statements and the like so made are punishable by fine or
imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may
jeopardize the validity of the application or any patent issued thereon.

1 **Typewritten Full Name
of First or Sole Inventor**

Judith

M.

VANDEWINCKEL

2 ****INVENTOR'S SIGNATURE:**

Given Name

Middle Initial

Family Name

3 ****DATE OF SIGNATURE:**

12

17

2003

Month

Day

Year

Residence:

Livonia

New York

USA

City

State or Province

Country

Citizenship:

United States of America

Post Office Address:

(Insert complete

mailing address,

including country)

4161 Frost Hollow Road

Livonia, New York 14457

***This form may be executed only when attached to the specification (including claims) at the end thereof if Box a. is checked.**

****Note to Inventor: Please sign name exactly as it appears above and insert actual date of signing.**

1	Typewritten Full Name of Second Joint Inventor (if any)		
	Vincenzo	G.	MARCELLO
	Given Name	Middle Initial	Family Name
2	**INVENTOR'S SIGNATURE:		
3	**DATE OF SIGNATURE:		
	12	17	2003
	Month	Day	Year
	Residence:	Webster	New York
		City	State or Province
			Country
	Citizenship:	United States of America	
	Post Office Address:	(Insert complete mailing address, including country)	
		780 Lauren Court	
		Webster, New York 14580	
1	Typewritten Full Name of Third Joint Inventor (if any)		
	Grazyna	E.	KMIECIK-LAWRYNOWICZ
	Given Name	Middle Initial	Family Name
2	**INVENTOR'S SIGNATURE:		
3	**DATE OF SIGNATURE:		
	12	17	2003
	Month	Day	Year
	Residence:	Fairport	New York
		City	State or Province
			Country
	Citizenship:	Canada	
	Post Office Address:	(Insert complete mailing address, including country)	
		14 Winding Brook Drive	
		Fairport, New York 14450	
1	Typewritten Full Name of Fourth Joint Inventor (if any)		
	Tie	Hwee	NG
	Given Name	Middle Initial	Family Name
2	**INVENTOR'S SIGNATURE:		
3	**DATE OF SIGNATURE:		
	12	18	2003
	Month	Day	Year
	Residence:	Mississauga	Ontario
		City	State or Province
			Country
	Citizenship:	Canada	
	Post Office Address:	(Insert complete mailing address, including country)	
		3205 Coldstream Road	
		Mississauga, Ontario, Canada L5L 5H9	
1	Typewritten Full Name of Fifth Joint Inventor (if any)		
	Chieh-Min		CHENG
	Given Name	Middle Initial	Family Name
2	**INVENTOR'S SIGNATURE:		
3	**DATE OF SIGNATURE:		
	12	17	03
	Month	Day	Year
	Residence:	Rochester	New York
		City	State or Province
			Country
	Citizenship:	United States of America	
	Post Office Address:	(Insert complete mailing address, including country)	
		26 Cardogan Square	
		Rochester, New York 14625	

****Note to Inventors:** Please sign name exactly as it appears and insert the actual date of signing.
This form may be executed only when attached to the first page of the Declaration and Power of Attorney form and the specification (including claims) of the application to which it pertains.